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APPLICANTS

Philip D. Mooney, Sellersville, PA;

** CONTINUING DATA ***** *No* ******* FOREIGN APPLICATIONS ***** *No* *****

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

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Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY PA	SHEETS DRAWING 3	TOTAL CLAIMS 33	INDEPENDENT CLAIMS 5
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged Examiner's Signature <i>[Signature]</i> Initials <i>SP</i>				

ADDRESS

Esther H. Chong, Esquire
 Synnestvedt & Lechner LLP
 2600 ARAMARK Tower
 1101 Market Street
 Philadelphia, PA 19107-2950

TITLE

METHOD AND SYSTEM FOR PROVIDING ACCURATE SERVICE RECORD USING PHONE LINE DETECTOR

FILING FEE RECEIVED 1104	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
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